PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patient, advance orders and notification of maintenance fees will be mailed to the current correspondence address, and order address, and order address, and order address, and order address. All orders are part of FEE ADDRESS' for maintenance fee notifications.

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23869 7590 05/14/2010 HOFFMANN & BARON, LLP

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(Depositor's name)		
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CONFIDMATION NO	ATTORNEY DOCKET NO	0.0

APPLICATION NO STUNG DATE EIDST NAMED INVENTOR ATTORNEY DOCKET NO. 10/589 796 10/05/2006 Lucas Alphonsus Maria Evers 003.107 PCT/IIS 2304

TITLE OF INVENTION: DISPENSING OF A SUBSTANCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	08/16/2010
EXAN	MINER	ART UNIT	CLASS-SUBCLASS			
ALEXANDE	R, REGINALD	3742	099-295000			
Change of correspondence address or indication of "Fee Address" (37 CFR 363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) anached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era 2	n & Baron,LLP	
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	ne)		

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

MDS Global Holding Ltd.

Gzira, Malta

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s). (Please first reapply any previously paid issue fee shown above)

4a. The following fee(s) are submitted: Issue Fee

A check is enclosed.

Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0.8 – 2.4.6.1. (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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Date ___ 8-11-10 Authorized Signature _ Typed or printed name Anna-lisa L. Gallo Registration No. 50.279

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